



STATE OF MAINE
DEPARTMENT OF PROFESSIONAL & FINANCIAL REGULATION
OFFICE OF PROFESSIONAL AND OCCUPATIONAL REGULATION
MANUFACTURED HOUSING BOARD



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Janet T. Mills
 Governor

Penny Vaillancourt
 Director

Joan F. Cohen
 Commissioner

APPLICATION FOR STATE OF MAINE
HOME INSTALLATION WARRANTY SEALS

1. Name of Installer _____
 License # _____
 Mailing Address _____

2. Number of Home Installation Warranty Seals Requested _____
 _____ Seals x \$110 per seal \$ _____ Total Amount Due

Check or Money Order made Payable to: **MAINE STATE TREASURER**

This form may be reproduced as needed.

FOR OFFICE USE ONLY	
Amount Received: _____	Check Number: _____
Cash Number: _____	Deposit Code: <u>43602632</u>
Number of Seals Issued: _____	Date of Issuance: _____
Seal Numbers Issued: _____ through _____	

I authorize the State of Maine, Department of Professional and Financial Regulation, Office of Professional and Occupational Regulation
 To charge my Visa MasterCard _____
 Name of Cardholder _____
 Mailing Address _____ City _____ State _____
 Zip Code _____ County _____ Telephone _____
 Expiration date: ____/____/____ in the amount of \$ _____
 I understand that fees are non-refundable
 Signature: _____ Date: ____/____/____